

HIV and AIDS—Testing, Screening, and Confidentiality

Edited by Rebecca Bennett and Charles A Erin, Oxford, Oxford University Press, 1999, 285 pages, £35.00.

If I have any objection to this book, it is to the title, in that it might narrow the audience that would benefit from it. Although the title is formally quite accurate in describing the contents, it underplays the relevance of the arguments set out herein to a very broad range of clinical arenas, for which HIV/AIDS can be a notable example. This fascinating series of essays covering the topics in the subtitle and much more, shows how valuable AIDS has been as a worked example of a series of interdigitating core issues in medical ethics, as it has been in so many areas of clinical medicine, public health and public policy. Although the authors and editors underplay this wider relevance, I found myself, despite my own substantial involvement in HIV and AIDS over the past twenty years, constantly wanting to cross-refer to other clinical areas. Perhaps readers of this review, who are minded to read, or even to reread, this book might take such a perspective.

The editors have managed, by their choice of authors, to organise a very broad range of perspectives. While the styles, compass and approach taken by the authors are quite variable, this is generally a benefit and not a problem, as it enables the reader to appreciate the diversity of views that can legitimately be taken on the same mountain. The format is not an artificially polarised debate (though there are plenty of polar views and opposing perspectives to be found), but rather a series of thoroughly reasoned perspectives, usually set out according to a clearly defined system of reasoning. The introductory chapter by the editors is a valuable guide to the issue itself and to the chapters and their perspectives (and is worth rereading at the end).

I must applaud the authors and editors for a truly informative exploration of some very big issues in medical ethics. The breadth of the coverage is substantial, encompassing ethical and legal

dimensions, and considers some central themes in health care ethics: Is the individual or society responsible for their health? Can health care workers be advocates for third party interests, as well as caring for their patients? There is a thoughtful essay on compensation and consent in relation to transfusion-associated infection, and another on whether a fiduciary relationship can be both an ethical approach and a legal concept. These chapters provide a conceptual underpinning to the more formal exploration of the very thorough coverage of testing, screening and confidentiality—in clinical and public contexts, as well as in research settings. There is a very nicely argued chapter near the end on the categories of people who might want to know the status of a person with HIV, and whether they should. It is, however, rather invidious to select out individual articles when so many are excellent. Similarly, picking out specific aspects of the debate could distort the impression of the impact of the whole, which I found to be deep as well as broad (hence I took an unconscionable time reading it for this review!).

Of course there is plenty with which one could take issue and I could not agree with all the views set out, despite their persuasive style and scholarly tone, but that is the essence of a book of this sort. A few chapters seemed slightly remote from clinical reality, but that distance was mostly used to good effect. One chapter (purportedly giving “an American perspective”) seemed inclined to rewrite the brief history of AIDS from a rather distorted personal and distant view; this was really the only weak chapter in the book. I don’t think most of my American colleagues would recognise this as a fair national perspective. I found it polemical and a barely recognisable account of what actually went on; it might better have been subtitled “the personal perspective of an American lawyer”.

I heartily recommend this outstanding volume to anyone interested in medical ethics, whether or not their primary interest is concerned with HIV/AIDS. It explores the rich perspectives that this terrible pandemic has given us on contemporary medical ethics.

ANTHONY J PINCHING

*Department of Immunology
St Bartholomew’s & The Royal London School
of Medicine & Dentistry Queen Mary,
University of London*

Bioethics is Love of Life: an Alternative Textbook

Darryl R J Macer, Christchurch, New Zealand, Eubios Ethics Institute, 1998, 158 pages, £12 (pb).

Love of life is the theme running through the eight chapters of this book, which cover theories of bioethics, the language of love, self love (embracing autonomy, selfishness, and altruism), love of freedom, loving relationships, animal ethics, and environmental ethics. Love of life, says Macer, is the “simplest and most all encompassing definition of bioethics, and it is universal among all peoples of the world” (page 1). This vision of love as a basis for a universal bioethics is part of a more ambitious project intended to inspire the creation of a global community wherein all individuals overcome diversity and work towards a perfect whole. To this end the author attempts to cover a vast range of religious beliefs and cultural traditions.

The opening discussion will be familiar to Western bioethicists, as it covers deontological and teleological theories, ranging across a broad spectrum of recent bioethical writing. The author concludes that the “inner motivation and strength of ethical behaviour comes from love” (page 27). The main objection to an ethical system based on love, claims Macer, is found in the tradition embracing Plato and Kant, who saw emotions and feelings as a distraction. Despite a wealth of literature relating to love, and the fundamental role it plays in the public’s conception of ethics, Macer complains that it has been largely ignored in recent bioethics. This is due to academic snobbery, claims Macer, which is bound up with a desire amongst bioethicists to have a monopoly on prescriptive ethics!

There is an interesting chapter on the boundaries of love towards animals, where “love” signifies an ethical commitment. But on the question whether causing harm or suffering to other animals is bad, Macer appears to follow the route taken by several Western bioethicists who attempt to weigh evidence in support or against claims that fetuses are persons. By analogy, if evidence is produced that some animals have “person traits” or “signs of love” then harming them is wrong.

This position has been dubbed "personism": it is frequently employed to mark the boundaries of moral obligation to fetuses, animals and patients with severe neurological disorders. Personism, it might be argued, is as arbitrary as speciesism and many other "isms" where a particular group is said to be entitled to preferential treatment.

Macer is to be commended for a rather ambitious attempt to bring together a wide range of religious beliefs and diverse ethical traditions, but the overall impression is that the book attempts to cover too much ground.

DAVID LAMB
University of Birmingham

Medical Ethics and the Future of Health Care

Edited by Kenneth Kearon and Fergus O'Ferrall, Dublin, Ireland, Columba Press, 2000, 168 pages, £7.99.

Public lecture series do not always, unfortunately, result in a published volume of interdisciplinary, informed and well argued papers. *Medical Ethics and the Future of Health Care* has succeeded, however, in doing just this. A public lecture series was organised by the Adelaide Hospital Society, Dublin, Ireland in 1999 to facilitate better public understanding of complex issues in health care confronting citizens and carers. The book assumes correctly that the Republic of Ireland is now indisputably a pluralist society, discomfiting to some readers who might look to the book for absolute answers and certainties. They would be disappointed because the essays show rather that it will be public debate and reasoned, imaginative approaches to decision making in health care that will replace the comforts of traditional certainties.

Coming from the internationally recognised philosopher of principlism, James Childress, the nurse ethicist, Verena Tschudin and representatives from obstetrics and gynaecology, midwifery, legal medicine, psychiatry and psychology the essays are accessible and informative without oversimplifying complex ethical issues. Childress's essay, Bioethics on the brink of a new millennium, calls for the inclusion of imagination in the

process of deliberation if we are going to achieve the discernment needed for balancing claims of individuals and claims of communities. And such balancing of individuals, professional institutions and communities is also an important component of the theses offered by the other authors. Tschudin encapsulates the wisdom of nursing philosophy in her essay, Ethics and holistic care, which maps out the conceptual connections between development of skills for self awareness, listening and ethics. These links are often ignored in bioethics writing and yet contributions from nursing philosophy allow the necessary expansion of a humane and person-centred framework for health care ethics.

Four of the essays by Denis Cusack, (medical law) Marcus Webb (psychiatry), Patrick Hanafin (law) and Sheila Greene (psychology) home in on the question of patient autonomy and institutional policies and legislation arising in questions about involuntary treatment in psychiatric institutions, the right to die, abortion legislation, genetics and implied transformations in our understanding of "persons". These four essays are particularly comprehensive and provocative in calling for responsible and sustained public debate as a medium for educating a wider public about the exercise of deliberative democracy in application to health care policy formation.

Cusack's essay, Autonomy and consent, recognises the value of autonomy while remaining sceptical of the desirability of full implementation in advance directives, or patient rights to information regardless of a doctor's wish to invoke "therapeutic privilege". Cusack wants to believe that the health care provider has a right to be "trusted" and that he or she should enjoy the privilege of self regulation. One response to Cusack is to argue that there is no natural right to be trusted and, as with leadership, trust must always be earned.

Hanafin's essay, Legislating the right to die, is outstanding in its comprehensive perspective on the right to die and the impact of what seems an abstract right on institutional and cultural ideologies which are deeply embedded in Irish state policies, the Irish constitution and ecclesiastical traditions. The superb accuracy of Hanafin's analysis makes clear that ethics cannot be relevant if it remains aloof from cultural, social and identity contexts. In the final essay of the book the reader is reminded of C P Snow's *Two Cultures* and his injunction that we

cannot afford a communication divide. Greene argues here that we can't leave science to the scientists but have to engage in active debate about the values that will guide our choices in the fast developing and promising area of human genetics. While not dodging a caution about a possible "slippery slope" in expanding reproductive technologies, Greene reiterates the bases for genuine citizen autonomy in the area of reproductive options: awareness and informed debate. It is refreshing to read in Greene's analysis that the problems are not in human cloning as such but in how we in society will perceive and value "clones" who might result from this reproductive process which is likely to be much closer to realisation than Greene predicts.

This is a readable and provocative book of essays which might not challenge professional bioethicists but would be an exemplary text for any study group, lay reader or adult education centre motivated to develop the level of public debate so strongly called for in this fine book.

DOLORES DOOLEY

Lecturer in Philosophy & Medical Ethics,
Department of Philosophy
National University of Ireland Cork,
Ireland

Genetic Information: Acquisition, Access, and Control

Edited by Alison K Thompson and Ruth F Chadwick, New York, Kluwer Academic/Plenum Publishers, 1999, 348 pages, \$115 (hc).

News that the first draft of a map of the human genome had been completed was received with great excitement but fears persist about how this knowledge will be used. Such concerns were the basis for an international conference held in Preston, England in December 1997. The issues addressed were non-existent when many of those attending the conference were born, but they are among the most pressing ethical problems we face today. They are philosophically challenging, and the way we deal with them will have far reaching consequences for both individuals and society. The proceedings of the conference are now available in this book.

Thirty authors, almost exclusively from Western Europe and North